

Substitute for form 1449/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(Use as many sheets as necessary)</i>				Complete if Known	
				Application Number	10/570,588-Conf. #7390
				Filing Date	January 22, 2007
				First Named Inventor	Martin A. Crockard
				Art Unit	1634
				Examiner Name	A. M. Shaw
Sheet	1	of	1	Attorney Docket Number	30986/40924

U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. ¹	Document Number Number-Kind Code ² (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear

FOREIGN PATENT DOCUMENTS						
Examiner Initials*	Cite No. ¹	Foreign Patent Document Country Code ³ -Number ⁴ -Kind Code ⁵ (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear	T ⁶
	B4	WO-00/08210	02-17-2000	Diadexus LLC		
	B5	WO-01/037779-A2	05-31-2001	Diadexus Inc		
	B6	WO-01/036470-A2	05-25-2001	Matritech Inc		
	B7	WO-02/103320-A2	12-27-2002	Rosetta Inpharmatics Inc		
	B8	WO-03/031942-A1	04-17-2003	Abbott Lab		
	B9	JP 2002-522751	07-23-2002	Diadexus LLC		x

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NON PATENT LITERATURE DOCUMENTS			
Examiner Initials*	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²

Examiner Signature	/Amanda Shaw/	Date Considered	08/15/2010
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Dated: June 22, 2010	Signature:  (David A. Gass)